Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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| Fill | n this information to identify y | our case: | | | |
|---------------|---|-----------------------------------|--|--------------------|-------------------------------|
| Deb | tor 1 BRANDIA LOI | RISA FORD | | | |
| | First Name | Middle Name | Last Name | | |
| | tor 2 se if, filing) First Name | Middle Name | Last Name | | |
| Unit | ed States Bankruptcy Court for th | e: DISTRICT OF NEVADA | | | |
| l | e number 19-10836 | | | | |
| (if kn | wn) | | | _ | cif this is an ded filing |
| Of | icial Form 106Sum | | | | |
| | | • | d Certain Statistical Information | | 12/15 |
| infoi your | mation. Fill out all of your sche original forms, you must fill ou | dules first; then complete the | are filing together, both are equally responsible for e information on this form. If you are filing amend the box at the top of this page. | | |
| Par | 1: Summarize Your Assets | | | | |
| | | | | Your a | ssets of what you own |
| 1. | Schedule A/B: Property (Offici | | | \$ | 0.00 |
| | • • | | | \$ | 10,681.00 |
| | | | | · | |
| | | - | | \$ | 10,681.00 |
| Par | 2: Summarize Your Liabilitie | 9S | | | |
| | | | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have 2a. Copy the total you listed in C | | (Official Form 106D) he bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| 3. | Schedule E/F: Creditors Who Ha 3a. Copy the total claims from F | | Form 106E/F) s) from line 6e of <i>Schedule E/F</i> | \$ | 0.00 |
| | 3b. Copy the total claims from F | Part 2 (nonpriority unsecured cla | aims) from line 6j of Schedule E/F | \$ | 44,919.00 |
| | | | Your total liabilities | \$ | 44,919.00 |
| | | | | | |
| Par | 3: Summarize Your Income | and Expenses | | | |
| 4. | Schedule I: Your Income (Official Copy your combined monthly income) | | I | \$ | 2,787.00 |
| 5. | Schedule J: Your Expenses (Offi Copy your monthly expenses fro | | | \$ | 2,781.00 |
| Par | 4: Answer These Questions | for Administrative and Statis | stical Records | | |
| 6. | Are you filing for bankruptcy to No. You have nothing to re | • | neck this box and submit this form to the court with yo | ur other scl | nedules. |
| 7. | Yes What kind of debt do you have | 9? | | | |
| | Your debts are primarily | consumer debts. Consumer d | lebts are those "incurred by an individual primarily for grows for statistical purposes. 28 U.S.C. § 159. | a personal, | family, or |
| | • • | rily consumer debts. You hav | e nothing to report on this part of the form. Check this | s <i>box</i> and s | ubmit this form to |

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1 BRANDIA LORISA FORD

Case number (if known) 19-10836

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,346.00

One Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | Case 19-108 | 36-abl Doc 13 | Entered 03/08/19 10:27:14 | Page 7 of 48 | 3 |
|---------------------------------|--|------------------------------|---|--------------------------|--|
| Fill in this info | ormation to identify your | case and this filing: | | | |
| Debtor 1 | BRANDIA LORIS | A FORD | | | |
| | First Name | Middle Name | Last Name | - | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | - | |
| United States E | Bankruptcy Court for the: | DISTRICT OF NEVADA | A | | |
| Case number | 19-10836 | | | | Check if this is an |
| | | | | | amended filing |
| O4: -: - 1 E | 10C | | | | |
| | orm 106A/B | | | | |
| | ile A/B: Prop | | and If an accept fite in more than an acceptance | n. liet the ecent in the | 12/15 |
| think it fits best. | Be as complete and accura | ate as possible. If two marr | once. If an asset fits in more than one categor ied people are filing together, both are equally orm. On the top of any additional pages, write you | responsible for supply | ying correct |
| Answer every qu | estion. | | | | |
| Part 1: Describ | e Each Residence, Building | g, Land, or Other Real Esta | te You Own or Have an Interest In | | |
| 1. Do you own o | r have any legal or equitabl | e interest in any residence | , building, land, or similar property? | | |
| No. Go to P | Part 2. | | | | |
| ☐ Yes. Where | e is the property? | | | | |
| Part 2: Describ | e Your Vehicles | | | | |
| | | | ehicles, whether they are registered or no dule G: Executory Contracts and Unexpired l | | les you own that |
| 3. Cars, vans, | trucks, tractors, sport u | tility vehicles, motorcyc | eles | | |
| ■ No | | | | | |
| ☐ Yes | | | | | |
| Examples: Bo | | | onal vehicles, other vehicles, and accessories essels, snowmobiles, motorcycle accessories | | |
| ■ No | | | | | |
| ☐ Yes | | | | | |
| | | | entries from Part 2, including any entries | | \$0.00 |
| .pages you | have attached for Part 2 | . Write that number her | 9 | => | Ψ0.00 |
| Part 3: Describ | oe Your Personal and Hous | ehold Items | | | _ |
| Do you own o | r have any legal or equit | able interest in any of t | he following items? | por t Do r | rent value of the tion you own? not deduct secured ms or exemptions. |
| Examples: № □ No | goods and furnishings Major appliances, furniture | , linens, china, kitchenwa | are | | · |
| Yes. Des | SCHDE | | | | |
| | Househo | d Goods | | | \$1,000.00 |
| | | | | | |

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

| De | ebtor 1 BRANDIA I | LORISA FORD Case number (if know | wn) 19-10836 |
|-----|--|---|--|
| | | | |
| | | Electronics: Cell phone, TV, Computer, etc. | \$1,000.0 |
| 3. | other collect | nd figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, c tions, memorabilia, collectibles | oin, or baseball card collections; |
| | ☐ Yes. Describe | | |
| €. | Equipment for sports Examples: Sports, phore musical inst No | tographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; cano | es and kayaks; carpentry tools; |
| | Yes. Describe | | |
| | Firearms Examples: Pistols, rifle No Yes. Describe | es, shotguns, ammunition, and related equipment | |
| 11. | Clothes Examples: Everyday of No ■ Yes. Describe | clothes, furs, leather coats, designer wear, shoes, accessories | |
| | | Clothes | \$200.0 |
| | ☐ Yes. DescribeNon-farm animals Examples: Dogs, cats☐ No | s, birds, horses | |
| | ☐ Yes. Describe | | |
| | Any other personal a ■ No □ Yes. Give specific in | and household items you did not already list, including any health aids you did not list | t |
| 15 | | e of all of your entries from Part 3, including any entries for pages you have attached t number here | \$2,200.00 |
| | nrt 4: Describe Your Fina | | |
| Do | o you own or have any | legal or equitable interest in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | ■ No | u have in your wallet, in your home, in a safe deposit box, and on hand when you file your po | etition |
| | ⊔ Yes | | |
| | | savings, or other financial accounts; certificates of deposit; shares in credit unions, brokeras. If you have multiple accounts with the same institution, list each. | ge houses, and other similar |
| | ■ Yes | Institution name: | |

Official Form 106A/B Schedule A/B: Property page 2

| De | BRANDIA LC | JRISA I | -טאט | Case number (if known) 19-10 | 836 |
|-----|--|-------------|-----------------------------|---|-----------------------|
| | | | | | |
| | | 17.1. | Checking | Chase Account # 8861 | \$0.00 |
| | | 17.2. | Savings | America First CU Account # 011-3 | \$0.00 |
| | | 17.3. | Other financial account | PayPal#4062 | \$1,250.00 |
| 18. | Bonds, mutual funds, on Examples: Bond funds, ■ No | | | erage firms, money market accounts | |
| | ☐ Yes | | Institution or issuer nar | me: | |
| | joint venture No | | · | ited and unincorporated businesses, including an interest in an L | .LC, partnership, and |
| | ☐ Yes. Give specific info | | about them me of entity: | % of ownership: | |
| 20. | Negotiable instruments Non-negotiable instrum | include p | personal checks, cashie | ble and non-negotiable instruments ers' checks, promissory notes, and money orders. fer to someone by signing or delivering them. | |
| | ■ No □ Yes. Give specific info | | about them uer name: | | |
| 21. | Retirement or pension Examples: Interests in I No | | | (b), thrift savings accounts, or other pension or profit-sharing plans | |
| | ■ Yes. List each accoun | | tely. of account: | Institution name: | |
| | | 401(I | <) | T. Rowe Price | \$550.00 |
| 22. | | d deposi | ts you have made so th | at you may continue service or use from a company blic utilities (electric, gas, water), telecommunications companies, or o | thers |
| 23. | Annuities (A contract fo ■ No | r a perio | dic payment of money t | to you, either for life or for a number of years) | |
| | ☐ Yes Iss | suer nam | ne and description. | | |
| 24. | Interests in an education 26 U.S.C. §§ 530(b)(1), 5 ■ No | | | lified ABLE program, or under a qualified state tuition program. | |
| | ☐ Yes Ins | stitution r | name and description. S | Separately file the records of any interests.11 U.S.C. § 521(c): | |
| 25. | Trusts, equitable or fut ■ No | ure inte | rests in property (other | er than anything listed in line 1), and rights or powers exercisable | e for your benefit |
| | ☐ Yes. Give specific info | ormation | about them | | |
| 26. | | | | other intellectual property from royalties and licensing agreements | |

Official Form 106A/B Schedule A/B: Property page 3

☐ Yes. Give specific information about them...

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| D | ebtor 1 | BRANDIA LORISA FORD | | Case n | number (if known) | 19-10836 |
|----|---------------|--|--|--------------------------|----------------------|---|
| 27 | Exam ■ No | ses, franchises, and other general ples: Building permits, exclusive lice. Give specific information about the second sec | enses, cooperative association holdir | ngs, liquor licenses, pr | ofessional license | es |
| N | | r property owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28 | □ No | efunds owed to you | | d the continues and the | | |
| | ■ Yes | . Give specific information about th | em, including whether you already file | a the returns and the t | tax years | |
| | | | 2018 Tax Refund | Fe | ederal | \$6,681.00 |
| 29 | Exam ■ No | y support nples: Past due or lump sum alimon . Give specific information | y, spousal support, child support, mai | ntenance, divorce sett | tlement, property | settlement |
| 30 | Exam | amounts someone owes you nples: Unpaid wages, disability insu benefits; unpaid loans you m . Give specific information | rance payments, disability benefits, si ade to someone else | ck pay, vacation pay, | workers' compen | sation, Social Security |
| 31 | Exam | ests in insurance policies onples: Health, disability, or life insur | ance; health savings account (HSA); o | credit, homeowner's, c | or renter's insuran | се |
| | ■ No □ Yes | . Name the insurance company of e Company n | | Beneficiary: | | Surrender or refund value: |
| 32 | If you some | one has died. | u from someone who has died expect proceeds from a life insurance | e policy, or are current | tly entitled to rece | ive property because |
| 33 | . Claim | | or not you have filed a lawsuit or ma | | yment | |
| | ■ No | nples: Accidents, employment dispu . Describe each claim | ites, insurance claims, or rights to sue | | | |
| 34 | ■ No | | ims of every nature, including coun | terclaims of the debt | tor and rights to | set off claims |
| 35 | | . Describe each claim inancial assets you did not alread | dy list | | | |
| | ■ No □ Yes | . Give specific information | | | | |
| 3 | | | ries from Part 4, including any entr | | | \$8,481.00 |
| | | | | | L | |

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

| Debto | r 1 BRANDIA LORISA FORD | | Case number (if known) | 19-10836 |
|-----------------|--|-----------------------|---------------------------|-------------------------|
| 37. Do | you own or have any legal or equitable interest in any business-related | property? | | |
| | o. Go to Part 6. | | | |
| ПΥ | es. Go to line 38. | | | |
| Part 6: | Describe Any Farm- and Commercial Fishing-Related Property You Of If you own or have an interest in farmland, list it in Part 1. | wn or Have an Interes | st In. | |
| 46. D o | you own or have any legal or equitable interest in any farm- o | r commercial fishir | ng-related property? | |
| | No. Go to Part 7. | | | |
| | Yes. Go to line 47. | | | |
| Part 7: | Describe All Property You Own or Have an Interest in That You I | Did Not List Above | | |
| <i>E</i> ■ □ | Yes. Give specific information | | ŗ | |
| 54. <i>I</i> | Add the dollar value of all of your entries from Part 7. Write that | number here | | \$0.00 |
| Part 8: | List the Totals of Each Part of this Form | | | |
| 55. F | Part 1: Total real estate, line 2 | | | \$0.00 |
| 56. F | Part 2: Total vehicles, line 5 | \$0.00 | | |
| 57. F | Part 3: Total personal and household items, line 15 | \$2,200.00 | | |
| 58. F | Part 4: Total financial assets, line 36 | \$8,481.00 | | |
| 59. F | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. F | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. F | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. 1 | otal personal property. Add lines 56 through 61 | \$10,681.00 | Copy personal property to | stal \$10,681.00 |
| 63. 1 | otal of all property on Schedule A/B. Add line 55 + line 62 | | | \$10,681.00 |

Official Form 106A/B Schedule A/B: Property page 5

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| Fill in this inform | mation to identify your | case: | | |
|---------------------|-------------------------|--------------------|-----------|--------------------------------------|
| Debtor 1 | BRANDIA LORISA | A FORD | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | nkruptcy Court for the: | DISTRICT OF NEVADA | | |
| Case number ' | 19-10836 | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
|--|---|-----|---|------------------------------------|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| Household Goods Line from Schedule A/B: 6.1 | \$1,000.00 | | \$1,000.00 | Nev. Rev. Stat. § 21.090(1)(b) |
| Ellie Holli Geriedale 742. Gil | | | 100% of fair market value, up to any applicable statutory limit | |
| Electronics: Cell phone, TV, Computer, etc. | \$1,000.00 | | \$1,000.00 | Nev. Rev. Stat. § 21.090(1)(b) |
| Line from Schedule A/B: 7.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Clothes Line from Schedule A/B: 11.1 | \$200.00 | | \$200.00 | Nev. Rev. Stat. § 21.090(1)(b) |
| Ellie Helli Geriedale 772. | | | 100% of fair market value, up to any applicable statutory limit | |
| Checking: Chase Account # 8861 Line from Schedule A/B: 17.1 | \$0.00 | | \$0.00 | Nev. Rev. Stat. § 21.090(1)(z) |
| Zine nom consulte 772. | | | 100% of fair market value, up to any applicable statutory limit | |
| Checking: Chase Account # 8861 Line from Schedule A/B: 17.1 | \$0.00 | | 0% | Nev. Rev. Stat. § 21.090(1)(g) |
| Line from Schedule A/D. 1111 | | | 100% of fair market value, up to any applicable statutory limit | |

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| De | ebtor 1 BRANDIA LORISA FORD | | | Case number (if known) | 19-10836 |
|----|---|--------------------------------------|---------|---|------------------------------------|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | Savings: America First CU Account # 011-3 | \$0.00 | | \$0.00 | Nev. Rev. Stat. § 21.090(1)(z) |
| | Line from Schedule A/B: 17.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Savings: America First CU Account # 011-3 | \$0.00 | | 75% | Nev. Rev. Stat. § 21.090(1)(g) |
| | Line from Schedule A/B: 17.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Other financial account: PayPal#4062 Line from Schedule A/B: 17.3 | \$1,250.00 | | 75% | Nev. Rev. Stat. § 21.090(1)(g) |
| | Line IIom Schedule A/B. 17.3 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Other financial account: PayPal#4062 Line from Schedule A/B: 17.3 | \$1,250.00 | | \$263.00 | Nev. Rev. Stat. § 21.090(1)(z) |
| | Line IIom Schedule A/B. 17.3 | | | 100% of fair market value, up to any applicable statutory limit | |
| | 401(k): T. Rowe Price Line from Schedule A/B: 21.1 | \$550.00 | | \$550.00 | Nev. Rev. Stat. § 21.090(1)(r) |
| | Line iisiii Gohedale /v.Z. = 111 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Federal: 2018 Tax Refund Line from Schedule A/B: 28.1 | \$6,681.00 | | \$6,681.00 | Nev. Rev. Stat. § 21.090(1)(z) |
| | 2.110 113.111 CO/104410 / V.Z. 201 1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 | | | led on or after the date of adjustmer | nt.) |
| | Yes. Did you acquire the property covere | d by the exemption wi | ithin 1 | ,215 days before you filed this case | ? |
| | □ No □ Yes | | | | |
| | | | | | |

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| Fill in this inform | i | | | |
|---|----------------|--------------------|-----------|------------------------------------|
| Debtor 1 | BRANDIA LORISA | A FORD | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | DISTRICT OF NEVADA | | |
| _ | 19-10836 | | | |
| (if known) | | | | Check if this is an amended filing |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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| | Case 19-1000 | JO-ADI D | OC 13 LINE | 7 Cu 03/00 | 0/13/10.27.14 | i age 15 ti | 40 |
|-------------------------|--|------------------------------------|--|-----------------|-----------------------------|----------------------|------------------------------------|
| Fill in th | nis information to identify you | case: | | | | | |
| Debtor 1 | BRANDIA LORIS | SA FORD | | | | | |
| | First Name | Middle N | Name | Last Name | | - | |
| Debtor 2 (Spouse if, | | Middle N | Name | Last Name | | _ | |
| United S | States Bankruptcy Court for the: | DISTRICT | OF NEVADA | | | _ | |
| Case nu (if known) | mber <u>19-10836</u> | | _ | | | _ | Check if this is an amended filing |
| Officia | al Form 106E/F | | | | | | |
| Sche | dule E/F: Creditors \ | Vho Have | Unsecured | l Claims | | | 12/15 |
| Schedule left. Attac | G: Executory Contracts and Unex D: Creditors Who Have Claims Seth the Continuation Page to this pad case number (if known). List All of Your PRIORITY U | cured by Prope age. If you have | rty. If more space is no information to re | needed, copy | the Part you need, fill it | out, number the er | tries in the boxes on the |
| | ny creditors have priority unsecu | | | | | | |
| ■ N | lo. Go to Part 2. | _ | - | | | | |
| ΠY | es. | | | | | | |
| Part 2: | | TY Unsecured | d Claims | | | | |
| ■ Y | all of your nonpriority unsecured | claims in the alp | phabetical order of t | he creditor who | o holds each claim. If a c | | |
| | cured claim, list the creditor separate one creditor holds a particular claim 2. | | | | | | |
| | | | | | | | Total claim |
| | Ad Astra Recovery | | Last 4 digits of ac | count number | 9406 | | \$274.00 |
| | Nonpriority Creditor's Name 7330 West 33rd Street Nor Suite 118 Wichita, KS 67205 | th | When was the deb | ot incurred? | Opened 09/12 La 07/12 | ast Active | _ |
| | Number Street City State Zip Code | | As of the date you | file, the claim | is: Check all that apply | | |
| | Who incurred the debt? Check one |). | | | | | |
| | Debtor 1 only | | ☐ Contingent | | | | |
| | Debtor 2 only | | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | | Disputed | | | | |
| | At least one of the debtors and a | | Type of NONPRIO | RITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a cor debt Is the claim subject to offset? | nmunity | ☐ Student loans ☐ Obligations arisi report as priority cla | | aration agreement or divo | rce that you did not | |
| | ■ No | | | | ng plans, and other similar | r debts | |
| | ☐ Yes | | | | Attorney Speedy C | | _ |

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| Debte | or 1 BRANDIA LORISA FORD | | Case number (if known) 19-10836 | |
|-------|---|--|--|----------|
| 4.2 | AMCA/American Medical Collection Agency | Last 4 digits of account number | 5210 | \$71.00 |
| | Nonpriority Creditor's Name Attention: Bankruptcy 4 Westchester Plaza, Suite 110 Elmsford, NY 10523 | When was the debt incurred? | Opened 9/09/18 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Medical | | |
| 4.3 | America First Credit U Nonpriority Creditor's Name | Last 4 digits of account number | 1117 | \$500.00 |
| | Po Box 9199 Ogden, UT 84409 | When was the debt incurred? | Opened 11/17 Last Active 11/02/18 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Check Cred | lit Or Line Of Credit | |
| 4.4 | America First Credit U Nonpriority Creditor's Name | Last 4 digits of account number | 1117 | \$614.00 |
| | Po Box 9199 Ogden, UT 84409 | When was the debt incurred? | Opened 11/17 Last Active 11/02/18 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other, Specify Credit Card | | |

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| Debto | BRANDIA LORISA FORD | | Case number (if known) 19-10836 | |
|-------|--|--|--|-------------|
| 4.5 | America First Credit U Nonpriority Creditor's Name | Last 4 digits of account number | 0930 | \$22,953.00 |
| | Po Box 9199 Ogden, UT 84409 | When was the debt incurred? | Opened 09/17 Last Active 12/29/18 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | ■ Other. Specify Repo 2017 | Nissan Sentra SV | |
| 4.6 | Capital One Nonpriority Creditor's Name | Last 4 digits of account number | 3218 | \$441.00 |
| | Attn: Bankruptcy Po Box 30285 | When was the debt incurred? | Opened 06/18 Last Active 1/09/19 | |
| | Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | paration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.7 | Capital One Nonpriority Creditor's Name | Last 4 digits of account number | | \$400.00 |
| | PO Box 17219 Baltimore, MD 21297 | When was the debt incurred? | 9/19/2018 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| | ls the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | ☐ Yes | Other, Specify | | |

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| Debto | r 1 BRANDIA LORISA FORD | Case number (if known) 19-10836 | |
|---------------|--|---|----------------|
| 4.8 | Charter Cable Nonpriority Creditor's Name | Last 4 digits of account number | \$500.00 |
| | PO Box 78083 Phoenix, AZ 85062 | When was the debt incurred? 4/2/2008 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | | _ | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 4.9 | CHECK CITY | Last 4 digits of account number | \$2,500.00 |
| C/O : 1800 | Nonpriority Creditor's Name C/O SEAN HILLIN ESQ 1800 E Sahara Ave # 102, Las Vegas, NV 89104 | When was the debt incurred? | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Lawsuit #18CN003068 | |
| 4.1 | Operation and all Operations | | #200.00 |
| 0 | Continental Currency Nonpriority Creditor's Name | Last 4 digits of account number | \$300.00 |
| | 335 E. 7th St | When was the debt incurred? 4/1/2007 | |
| | Long Beach, CA 90813 | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | Поль | |
| | • | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | <u> </u> | |
| | □ 162 | Other. Specify | |

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| Debt | or 1 BRANDIA LORISA FORD | | Case number (if known) 19-10836 | | | |
|----------|---|---|---|----------|--|--|
| 4.1 1 | Credit One Bank | Last 4 digits of account number | 5222 | \$889.00 | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193 | When was the debt incurred? | Opened 09/17 Last Active 08/18 | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| | \square Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | |
| | ☐ Yes | Other. Specify Credit Card | <u> </u> | | | |
| 4.1 2 | Crest Financial | Last 4 digits of account number | | \$800.00 | | |
| | Nonpriority Creditor's Name 61 West 13490 South Draper, UT 84020 | When was the debt incurred? | 5/1/2016 | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | |
| | No | Debts to pension or profit-sharing | Debts to pension or profit-sharing plans, and other similar debts | | | |
| | Yes | Other. Specify | | | | |
| 4.1 3 | Fingerhut | Last 4 digits of account number | 9230 | \$793.00 | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 1250 Saint Cloud, MN 56305 | When was the debt incurred? | Opened 12/17 Last Active 08/18 | | | |
| | Saint Cloud, MN 56395 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated ☐ Disputed | | | | |
| | ☐ Debtor 1 and Debtor 2 only | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans☐ Obligations arising out of a sepa | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | |
| | No | Debts to pension or profit-sharing | • • | | | |
| | ☐ Yes | ■ Other. Specify Charge Acc | count | | | |

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| Debte | or 1 BRANDIA LORISA FORD | | Case number (if known) 19-10836 | |
|----------|--|--|--|----------|
| 4.1 4 | First Premier Bank | Last 4 digits of account number | 9318 | \$658.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117 | When was the debt incurred? | Opened 04/12 Last Active 09/13 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.1 5 | First Premier Bank | Last 4 digits of account number | 7292 | \$581.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117 | When was the debt incurred? | Opened 09/10 Last Active 09/13 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify Credit Card | <u> </u> | |
| 4.1 6 | First Premier bank Nonpriority Creditor's Name | Last 4 digits of account number | | \$850.00 |
| | 601 S. Minnesota Sioux Falls, SD 57104 | When was the debt incurred? | 8/10/2010 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | 3 | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other Specify | | |

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| Debte | or 1 BRANDIA LORISA FORD | | Case number (if known) 19-10836 | | | | |
|----------|--|--|---|----------|--|--|--|
| 4.1 7 | Genesis Bc/celtic Bank | Last 4 digits of account number | 0535 | \$758.00 | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy 268 South State Street Ste 300 Salt Lake City, UT 84111 Number Street City State Zip Code | When was the debt incurred? As of the date you file, the claim | Opened 04/18 Last Active 09/18 | | | | |
| | Who incurred the debt? Check one. | | | | | | |
| | ■ Debtor 1 only | Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | Disputed | | | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| | □Yes | Other. Specify Credit Card | <u> </u> | | | | |
| 4.1 8 | Green Gate Services Nonpriority Creditor's Name | Last 4 digits of account number | | \$500.00 | | | |
| | 600 F St Ste 3 Ste 721 Arcata, CA 95521 | When was the debt incurred? | 4/1/2012 | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | lacktriangle At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | | |
| | debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharin | | | | | |
| | Yes | Other. Specify | | | | | |
| 4.1 9 | Green Trust Cash | Last 4 digits of account number | | \$600.00 | | | |
| | Nonpriority Creditor's Name PO Box 340 Hays, MT 59527 | When was the debt incurred? | 2/1/2012 | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | only Disputed | | | | | |
| | lacksquare At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | ☐ Yes | Other, Specify | | | | | |

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| Debto | or 1 BRANDIA LORISA FORD | | Case number (if known) 19-10836 | |
|----------|---|--|---|------------|
| 4.2 0 | High Performance Capit Nonpriority Creditor's Name | Last 4 digits of account number | 4309 | \$0.00 |
| | 34 Executive Park Ste 18 Irvine, CA 92614 | When was the debt incurred? | Opened 09/13 Last Active 10/19/17 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Automobile | 9 | |
| 4.2 1 | Iq Data International | Last 4 digits of account number | 0645 | \$1,751.00 |
| | Nonpriority Creditor's Name 1010se Everett Mall Way Everett, WA 98208 | When was the debt incurred? | Opened 02/15 Last Active 12/14 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Collection | Attorney Hawthorne Terrace Ca | |
| 4.2 | Las Vegas Valley Water | Last 4 digits of account number | | \$350.00 |
| | Nonpriority Creditor's Name 1001 S Valley View Blvd Las Vegas, NV 89107 | When was the debt incurred? | 10/1/2018 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims Debts to pension or profit-sharin | a plane, and other similar debts | |
| | ■ No | <u> </u> | אַ אָימויס, מווע טעופו אווווומו עפטנא | |
| | ☐ Yes | Other, Specify | | |

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| r1 BRANDIA LORISA FORD | | Case number (if known) 19-10836 | |
|--|--|---|---------------------------------------|
| Lend Up | Last 4 digits of account number | | \$200.00 |
| Nonpriority Creditor's Name 237 Kearmy St Ste 372 | When was the debt incurred? | 8/1/2015 | · · · · · · · · · · · · · · · · · · · |
| San Francisco, CA 94108 Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a separations | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify | | |
| Merrick Bank/CardWorks | Last 4 digits of account number | 6673 | \$800.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy | _ | Opened 07/18 Last Active | |
| Po Box 9201 Old Bethpage, NY 11804 | When was the debt incurred? | 1/25/19 | |
| Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | • | , | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | ■ Other. Specify Credit Card | 1 | |
| Money Tree | Last 4 digits of account number | | \$600.00 |
| Nonpriority Creditor's Name | | | |
| 4210 Craig Rd Ste 102 North Las Vegas, NV 89032 | When was the debt incurred? | 8/10/2017 | |
| Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| No | Debts to pension or profit-sharing | ng pians, and other similar debts | |
| Yes | Other. Specify | | |

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| Debt | tor 1 BRANDIA LORISA FORD | Case number (if known) 19-10836 | |
|----------|---|---|------------|
| 4.2 6 | Orions Management Grou | Last 4 digits of account number 90N1 | \$2,238.00 |
| | Nonpriority Creditor's Name Po Box 25208 | When was the debt incurred? Opened 11/18 | |
| | Anaheim, CA 92825 | Opened 11/10 | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Collection Attorney Crest Financial Services Llc | |
| 4.2 7 | Progressive Finance | Last 4 digits of account number | \$800.00 |
| | Nonpriority Creditor's Name 256 west data dr draper, UT 84020 | When was the debt incurred? 3/7/2013 | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 4.2 8 | QVC | Last 4 digits of account number | \$400.00 |
| 0 | Nonpriority Creditor's Name | | <u> </u> |
| | 300 NW Peacock Blvd | When was the debt incurred? 8/9/2016 | |
| | Port St. Lucie, FL 34986 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | As of the date you me, the claim is. Oneon an that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | Student loans | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify | |
| | | -1 · · · · · | |

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| Debt | or 1 BRANDIA LORISA FORD | | Case number (if known) 19-10836 | |
|----------|--|--|---|----------|
| 4.2 9 | Rgs Financial | Last 4 digits of account number | 9654 | \$832.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 852039 | When was the debt incurred? | Opened 07/18 | |
| | Richardson, TX 75085 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify Collection | Attorney Cox Communications | |
| 4.3 0 | SCE (Southern California Edison) Nonpriority Creditor's Name | Last 4 digits of account number | 7244 | \$126.00 |
| | Attn: Bankruptcy Po Box 800 Rosemead, CA 91770 | When was the debt incurred? | Opened 03/09 Last Active 5/06/16 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| | No | ☐ Debts to pension or profit-sharin | | |
| | Yes | Other. Specify Consolidat | ion | |
| 4.3 1 | So Cal Edison Nonpriority Creditor's Name | Last 4 digits of account number | | \$115.00 |
| | po box 6400 rancho cucamonga, CA 91729 | When was the debt incurred? | 6/1/2015 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | Other. Specify | | |

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| BRANDIA LORISA FORD | Case number (if known) 19-10836 | |
|---|---|---|
| Speedy Cash | Last 4 digits of account number | \$274.0 |
| Nonpriority Creditor's Name 857 Rosecrans Ave Gardena, CA 90247 | When was the debt incurred? 5/1/2008 | , , , , , , , , , , , , , , , , , , , |
| Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? ■ No | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| ■ No □ Yes | Other. Specify | |
| _ 103 | — Other: Specify | |
| Star Harbor FCU | Last 4 digits of account number | \$350.0 |
| Nonpriority Creditor's Name 2021 E Del Amo Blvd Compton, CA 90220 | When was the debt incurred? 9/1/2013 | |
| Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| Check if this claim is for a community | Student loans | |
| debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | Other. Specify | |
| Tmobile | Last 4 digits of account number | \$300.00 |
| Nonpriority Creditor's Name | | · · |
| 1 Los Angeles, CA 90247 | When was the debt incurred? 8/14/2013 | |
| Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | _ | |
| Debtor 1 only | Contingent | |
| Debtor 2 only | Unliquidated | |
| Debtor 1 and Debtor 2 only | Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| No | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | _ | |
| Yes | Other. Specify | |

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| Debt | or 1 BRANDIA LORISA FORD | Case number (if known) 19-10836 | |
|------|---|---|----------|
| 4.3 | Union bank of CA | Last 4 digits of account number | \$101.00 |
| 5 | Nonpriority Creditor's Name 7108 N Fresno St Ste 200 | When was the debt incurred? 6/18/2010 | <u> </u> |
| | Fresno, CA 93720 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | The of the date year me, the stand to officer an that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify | |
| 4.3 | | | ***** |
| 6 | US Fast Cash | Last 4 digits of account number | \$300.00 |
| | Nonpriority Creditor's Name 9120 Double Diamond Pkwy ste 5436 | When was the debt incurred? 6/1/2009 | |
| | Reno, NV 89521 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? — | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 4.3 | Verizon | Last 4 digits of account number | \$400.00 |
| | Nonpriority Creditor's Name | | |
| | 1 | When was the debt incurred? 7/1/2011 | |
| | Los Angeles, CA 90016 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 BRANDIA LORISA FORD

Case number (if known)

19-10836

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|-----|---|--|---|---|
| 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| | | | | |
| 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | | Total Claim |
| 6f. | Student loans | 6f. | \$ | 0.00 |
| | | | | |
| 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 44,919.00 |
| 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 44,919.00 |
| | 6b. 6c. 6d. 6e. 6f. 6g. 6h. | 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6g. 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6d. 6d. 6d. 6d. | 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$ \$ 6b. \$ 6c. \$ 6c. \$ 6d. \$ 6e. \$ 6f. \$ 6g. \$ 6g. \$ 6h. \$ 6h. \$ 6i. \$ |

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| Fill in this inform | | | | |
|---|---------------|--------------------|-----------|--------------------------------------|
| Debtor 1 | BRANDIA LORIS | A FORD | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | DISTRICT OF NEVADA | | |
| _ | 19-10836 | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | n whom you have the r, Street, City, State and ZIP | e contract or lease Code | State what the contract or lease is for |
|-----|-----------|--------------|---|-----------------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | <u> </u> |
| 2.3 | City | | State | ZIF Code | |
| 2.0 | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.4 | • | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.5 | - ii | | Oldio | 211 0000 | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |

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| Fill in this in | formation to identify your | case: | | | |
|---------------------|---|-------------------------------|-------------------------|--------------------------|--|
| Debtor 1 | BRANDIA LORIS | A FORD | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | First Name | Middle None | Lost Name | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | DISTRICT OF NEVADA | 1 | | |
| Case number | 19-10836 | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Official F | Form 106H | | | | |
| | le H: Your Cod | ohtore | | | 42/45 |
| <u>Scriedu</u> | ie n. Tour Cou | enroi 2 | | | 12/15 |
| | nd case number (if known) u have any codebtors? (If | • • | | e as a codebtor. | |
| ■ N. | | | | | |
| ■ No □ Yes | | | | | |
| □ 162 | | | | | |
| | | | | | ty states and territories include |
| Alizona, | California, Idaho, Louisiana, | , Nevada, New Mexico, Pu | erio Rico, Texas, wasi | lington, and wisconsin.) | |
| ■ No. Go | o to line 3. | | | | |
| ☐ Yes. □ | oid your spouse, former spo | use, or legal equivalent live | e with you at the time? | | |
| | | | | | |
| in line 2 | again as a codebtor only i 6D), Schedule E/F (Official | f that person is a guaran | tor or cosigner. Make | sure you have listed t | g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fil |
| | lumn 1: Your codebtor | | | Column 2: The cre | editor to whom you owe the debt |
| | ne, Number, Street, City, State and Zi | IP Code | | Check all schedule | |
| 3.1 | | | | □ Sahadula D. lin | |
| Nar | me | | | | |
| | | | | ☐ Schedule G, lin | |
| Nur | mber Street | | | _ | |
| City | | State | ZIP Code | | |
| | | | | | |
| 3.2 | | | | Schedule D, lin | |
| Nar | ne | | | ☐ Schedule E/F, | |
| | | | | ☐ Schedule G, lin | ne |
| | mber Street | Ctoto | 7ID Codo | | |
| City | , | State | ZIP Code | | |

| EIII | in this information to ide | ntify your oo | 200 | | | | ı | | | | |
|------|--|-----------------------------|---|----------------------------------|-------------|-------|----------------|-------------|---------------|----------------------|----------|
| | | | RISA FORD | | | | | | | | |
| 1 | btor 2 | | - | | | _ | | | | | |
| ' | | ourt for the: | DISTRICT OF NEVAD | Α | | | | | | | |
| | se number 19-108 | | | | | | Check | if this is: | | | |
| | nown) | 30 | | | | | _ | amende | | | |
| | | | | | | | □ As | suppleme | ent showing | postpetition | chapter |
| _ | "" · I E 40 | | | | | | 13 | income a | as of the fol | lowing date: | |
| 0 | fficial Form 10 | <u> 161</u> | | | | | M | M / DD/ Y | YYY | | |
| S | chedule I: Yo | ur Inco | me | | | | | | | | 12/15 |
| spo | use. If you are separate | ed and your this form. C | are married and not filing with the top of any addition | th you, do not inclu | de infor | matio | on about | your spo | use. If mo | re space is i | needed, |
| 1. | Fill in your employme information. | ent | | Debtor 1 | | | | Debtor 2 | or non-fili | ng spouse | |
| | If you have more than one job, | | | ■ Employed | | | | ☐ Employed | | | |
| | attach a separate page information about addi | | Employment status* | ☐ Not employed | | | ☐ Not employed | | | | |
| | employers. | | Occupation | Underwriting As | ssistan | t | | | | | |
| | Include part-time, seas self-employed work. | sonal, or | Employer's name | Sutherland Glob | oal Ser | vice | <u> </u> | | | | |
| | Occupation may include or homemaker, if it app | | Employer's address | 8725 W Sahara Las Vegas, NV 8 | | | | | | | |
| | | | How long employed th | | | t for | Additiona | al Emplo | yment Info | rmation | |
| Pai | rt 2: Give Details | About Mon | thly Income | | | | | | | | |
| | imate monthly income a | | te you file this form. If y | ou have nothing to re | eport for | any l | ine, write | \$0 in the | space. Incl | ude your nor | n-filing |
| | ou or your non-filing spou e space, attach a separa | | re than one employer, co his form. | mbine the information | n for all o | emplo | oyers for th | hat perso | n on the lin | es below. If y | ou need |
| | | | | | | | For Debt | tor 1 | For Deb | tor 2 or g spouse | |
| 2. | | | y, and commissions (be alculate what the monthly | | 2. | \$ | 3,0 | 033.00 | \$ | N/A | |
| 3. | Estimate and list mor | nthly overti | ne pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |

Official Form 106I Schedule I: Your Income page 1

3,033.00

\$

N/A

4. Calculate gross Income. Add line 2 + line 3.

| Debt | or 1 | BRANDIA LORISA FORD | - | (| Case r | number (<i>if know</i> | n) | 19-10 | 836 | | |
|------|-----------------------|--|----------|-----------|----------|-------------------------|----------|-----------|---------------|--------------|--------------------|
| | | | | | For | Debtor 1 | | For D | ebtor | 2 or | |
| | _ | | | | Φ. | | | | iling s | pouse | |
| | Cop | by line 4 here | 4. | | \$ | 3,033.0 | <u>0</u> | \$ | | N/A | <u>\</u> |
| 5. | List | all payroll deductions: | | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a | а. | \$ | 192.0 | 0 | \$ | | N/A | ١ |
| | 5b. | Mandatory contributions for retirement plans | 5b | ٥. | \$ | 0.0 | 0 | \$ | | N/A | <u></u> |
| | 5c. | Voluntary contributions for retirement plans | 50 | Э. | \$ | 0.0 | 0 | \$ | | N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 50 | | \$ | 0.0 | _ | \$ | | N/A | _ |
| | 5e. | Insurance | 5e | | \$ | 54.0 | | \$ | | N/A | _ |
| | 5f. | Domestic support obligations | 5f | | \$ | 0.0 | _ | \$ | | N/A | _ |
| | 5g. 5h. | Union dues Other deductions. Specify: | 5g | ያ. ገ.+ | \$ _ | 0.0 | _ | \$ +\$ | | N/A | |
| 6 | | · · · · · · · · · · · · · · · · · · · | _ | | Ψ— \$ | | <u> </u> | · : — | | | _ |
| 6. | | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | <u> </u> | 246.0 | | \$ | | N/A | |
| 7. | | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$ | 2,787.0 | 0 | \$ | | N/A | <u>\</u> |
| 8. | List 8a. | All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | 0.0 | | ¢ | 0.0 | • | ¢ | | N 1/0 | |
| | 8b. | monthly net income. Interest and dividends | 8a 8b | | \$ | 0.0 | _ | \$ | | N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent | | ٦. | Φ | 0.0 | <u>U</u> | Φ | | N/A | <u>\</u> |
| | 00. | regularly receive Include alimony, spousal support, child support, maintenance, divorce | | | | | _ | • | | | |
| | 0-1 | settlement, and property settlement. | 80 | | \$ | 0.0 | | \$ | | N/A | |
| | 8d. 8e. | Unemployment compensation Social Security | 8c 8e | | \$ | 0.0 | | \$ | | N/A | _ |
| | 8f. | Other government assistance that you regularly receive | Ü. | ٠. | Ψ | 0.0 | _ | Ψ | | 11/ | <u>`</u> |
| | | Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f | | \$ | 0.0 | 0 | \$ | | N/A | . |
| | 8g. | Pension or retirement income | _ 8g | | \$ | 0.0 | | \$ | | N/A | |
| | 8h. | Other monthly income. Specify: | 8h | 1.+ | \$ | 0.0 | 0 - | + \$ | | N/A | <u>\</u> |
| 9. | Add | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | S | 0.0 | 0 | \$ | | N/ | Ά |
| 40 | 0-1 | aulata manthir income. A III Fra 7 a Fra 0 | . [| Φ. | | 707.00 | Φ. | | N1/A | • | 0.707.00 |
| 10. | | culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$_ | | 2,787.00 + | \$ _ | | N/A | = \$ _ | 2,787.00 |
| | | | | | | | | | | | |
| 11. | Incli othe Do i | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | depe | | | • | | | hedule 11. | 4 | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaillies | | | | | | | 12. | \$ | 2,787.00 |
| 13. | Do | you expect an increase or decrease within the year after you file this form | ? | | | | | | l | Comb | ined ily income |
| | | No. | | | | | | | | | |
| | | Voc Evoloin: | | | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

Debtor 1 BRANDIA LORISA FORD Case number (if known) 19-10836

Official Form B 6l Attachment for Additional Employment Information

| Debtor | |
|---------------------|--------------------------|
| Occupation | ННА |
| Name of Employer | A Better Way Home Health |
| How long employed | 2 1/2 years |
| Address of Employer | 6725 S. Eastern Ave |
| , , | Las Vegas, NV 89119 |

Official Form 106I Schedule I: Your Income page 3

| | in this informs | tion to identify yo | r. 00001 | | | | | | | |
|--------|--|--|---------------------------------------|--|--------------------------|------------|----------|-------------------------------------|-------------------------------|------|
| | in this informa | | | | | | | | | |
| Deb | tor 1 | BRANDIA LO | RISA FO | ORD | | | | if this is: | | |
| Deb | tor 2 | | | | | | | n amended filing supplement show | ving postpetition cha | oter |
| (Spc | ouse, if filing) | | | | | | | | the following date: | |
| Unit | ed States Bankr | ruptcy Court for the: | DISTRI | CT OF NEVADA | | | М | M / DD / YYYY | | |
| Cas | e number 19 |)-10836 | | | | | | | | |
| (If kı | nown) | | | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | | | |
| Sc | chedule | J: Your I | Exper | ses | | | | | | 12/1 |
| Be a | as complete a ormation. If m mber (if know | and accurate as ore space is nee n). Answer ever | possible. eded, atta y question | If two married people ch another sheet to th | | | | | | |
| Pari | t 1: Descr Is this a joir | ibe Your House | hold | | | | | | | |
| •• | No. Go to | | | | | | | | | |
| | | s Debtor 2 live i | n a separ | ate household? | | | | | | |
| | ПΝ | | • | | | | | | | |
| | □ Y | es. Debtor 2 mus | t file Offici | al Form 106J-2, Expens | ses for Separate Hous | ehold of D | ebtor | · 2. | | |
| 2. | Do vou have | e dependents? | □ No | | | | | | | |
| | Do not list D Debtor 2. | - | Yes. | Fill out this information fo each dependent | | | | Dependent's age | Does dependent live with you? | |
| | Do not state | the | | | | | | | □ No | |
| | dependents | | | | Son | | | 6 | Yes | |
| | | | | | Son | | | 10 | □ No ■ Yes | |
| | | | | | | | | | □ No | |
| | | | | | | | | | ☐ Yes | |
| | | | | | | | | | □ No | |
| 3. | Do your eyr | enses include | _ | | | | | | ☐ Yes | |
| ٥. | expenses o | f people other th | han $_{f \Box}$ | No | | | | | | |
| | yourself and | d your depender | nts? ⊔ | Yes | | | | | | |
| Par | | ate Your Ongoir | | | | | | | | |
| exp | | | | uptcy filing date unles y is filed. If this is a su | | | | | | |
| Incl | lude expense | s paid for with r | າon-cash - | government assistand | e if you know | | | | | |
| | value of sucl | | d have inc | luded it on Schedule | I: Your Income | | | Your exp | enses | |
| (OII | ilciai Foriii 10 | юі.) | | | | | | , ca., ca.p. | | |
| 4. | | or home ownersl and any rent for the | | ses for your residence r lot. | e. Include first mortgag | je 4. | \$ | | 1,020.00 | |
| | If not includ | led in line 4: | | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | | 0.00 | |
| | | rty, homeowner's | , or renter | 's insurance | | 4b. | | | 16.00 | |
| | | | | ipkeep expenses | | 4c. | | | 40.00 | |
| 5 | | owner's associati | | | homo oquity loons | 4d. | \$ \$ | | 0.00 | |
| 5. | Auditional f | nortgage payme | into for yo | our residence, such as | nome equity loans | 5. | Φ. | | 0.00 | |

| Debto | r1 BR | ANDIA LORISA FORD | Case num | ber (if known) | 19-10836 |
|-------------|--------------|---|--------------|----------------|-------------------------------|
| 3. L | Jtilities: | | | | |
| 6 | a. Elect | tricity, heat, natural gas | 6a. | \$ | 95.00 |
| 6 | 6b. Wate | er, sewer, garbage collection | 6b. | \$ | 0.00 |
| 6 | c. Tele | phone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 125.00 |
| 6 | d. Othe | r. Specify: | 6d. | \$ | 0.00 |
| F | ood and | housekeeping supplies | | \$ | 750.00 |
| C | Childcare | and children's education costs | 8. | \$ | 0.00 |
| C | Clothing, I | aundry, and dry cleaning | 9. | \$ | 100.00 |
| | | are products and services | 10. | \$ | 65.00 |
| | | nd dental expenses | 11. | \$ | 60.00 |
| | | ation. Include gas, maintenance, bus or train fare. | | · | |
| | | ude car payments. | 12. | \$ | 275.00 |
| . E | Entertainn | nent, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 75.00 |
| . c | Charitable | contributions and religious donations | 14. | \$ | 0.00 |
| . Ii | nsurance. | | | | |
| | Oo not inclu | ude insurance deducted from your pay or included in lines 4 or 20. | | | |
| 1 | 5a. Life i | nsurance | 15a. | \$ | 0.00 |
| 1 | 5b. Heal | th insurance | 15b. | \$ | 0.00 |
| 1 | 5c. Vehi | cle insurance | 15c. | \$ | 160.00 |
| 1 | 5d. Othe | r insurance. Specify: | 15d. | \$ | 0.00 |
| . Т | Taxes. Do | not include taxes deducted from your pay or included in lines 4 or 20. | | | |
| S | Specify: | , , , | 16. | \$ | 0.00 |
| . II | nstallmen | t or lease payments: | | | |
| 1 | 7a. Car | payments for Vehicle 1 | 17a. | \$ | 0.00 |
| 1 | 7b. Car | payments for Vehicle 2 | 17b. | \$ | 0.00 |
| 1 | 7c. Othe | r. Specify: | 17c. | \$ | 0.00 |
| 1 | 7d. Othe | r. Specify: | 17d. | \$ | 0.00 |
| . Y | our payn | nents of alimony, maintenance, and support that you did not report as | | | 0.00 |
| | | from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | · | 0.00 |
| | | ments you make to support others who do not live with you. | | \$ | 0.00 |
| | Specify: _ | | 19. | | |
| | | property expenses not included in lines 4 or 5 of this form or on Sche | | | |
| | | gages on other property | 20a. | | 0.00 |
| 2 | 20b. Real | estate taxes | 20b. | | 0.00 |
| 2 | 20c. Prop | erty, homeowner's, or renter's insurance | 20c. | | 0.00 |
| 2 | 20d. Main | tenance, repair, and upkeep expenses | 20d. | | 0.00 |
| 2 | 20e. Hom | eowner's association or condominium dues | 20e. | \$ | 0.00 |
| | Other: Spe | ecify: | 21. | +\$ | 0.00 |
| _ | S-11-4 | | | | |
| | | your monthly expenses | | • | 0.704.00 |
| | | nes 4 through 21. | | \$ | 2,781.00 |
| 2 | 22b. Copy | line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | Ψ | |
| 2 | 22c. Add lir | ne 22a and 22b. The result is your monthly expenses. | | \$ | 2,781.00 |
| _ | Palculate : | your monthly net income. | | | |
| | | your monthly net income. y line 12 (your combined monthly income) from Schedule I. | 23a. | ¢ | 2 707 00 |
| | | y your monthly expenses from line 22c above. | 23a. 23b. | · | 2,787.00 |
| 2 | Lou. Copy | your monthly expenses from line 220 above. | 230. | -φ | 2,781.00 |
| 2 |)30 Ciih+ | ract your monthly expenses from your monthly income | | | |
| 2 | | ract your monthly expenses from your monthly income. result is your monthly net income. | 23c. | \$ | 6.00 |
| | 1116 | Total to you. Monthly not into into. | | | |
| 4. C | o you ex | pect an increase or decrease in your expenses within the year after yo | ou file this | form? | |
| F | or example | , do you expect to finish paying for your car loan within the year or do you expect you | | | ease or decrease because of a |
| | | to the terms of your mortgage? | | | |
| | No. | | | | |
| г | ☐ Yes. | Explain here: | | | |

| | tion to identify your | case: | | |
|--|---|---|---|--|
| Debtor 1 | BRANDIA LORIS | A FORD | | |
| - | First Name | Middle Name | Last Name | _ |
| Debtor 2 | | | | _ |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankr | ruptcy Court for the: | DISTRICT OF NEVADA | | _ |
| Case number 19- | -10836 | | | _ 0, , , , , , , |
| (If Known) | | | | ☐ Check if this is an amended filing |
| If two married peop | ole are filing together orm whenever you fi r property by fraud in | r, both are equally responsib ile bankruptcy schedules or a n connection with a bankrup | | |
| | | 1519, and 3571. | | |
| Sign B | | 1919, and 3971. | | |
| <u> </u> | elow | | to help you fill out bankruptcy for | ms? |
| <u> </u> | elow | | to help you fill out bankruptcy for | ms? |
| Did you pay o | elow | | Attac | ms? ch Bankruptcy Petition Preparer's Notice, aration, and Signature (Official Form 119) |
| Did you pay o No Yes. Nan | r agree to pay some | one who is NOT an attorney | Attac | ch Bankruptcy Petition Preparer's Notice, aration, and Signature (Official Form 119) |
| Did you pay o No Yes. Nan Under penalty that they are tr | r agree to pay some ne of person of perjury, I declare ue and correct. | one who is NOT an attorney | Attac Deck y and schedules filed with this dec | ch Bankruptcy Petition Preparer's Notice, aration, and Signature (Official Form 119) |
| Did you pay o No Yes. Nan Under penalty that they are tr | r agree to pay some ne of person of perjury, I declare | one who is NOT an attorney | Attac Deck | ch Bankruptcy Petition Preparer's Notice, aration, and Signature (Official Form 119) |
| Did you pay o No Yes. Nan Under penalty that they are tr | or agree to pay some one of person of perjury, I declare rue and correct. DIA LORISA FORD | one who is NOT an attorney | Attac Decl y and schedules filed with this dec X | ch Bankruptcy Petition Preparer's Notice, aration, and Signature (Official Form 119) |

| Fill in this in | | | | | | |
|---|---|---|---|------------|---------------------------|-------|
| Debtor 1 | BRANDIA LORIS | A FORD | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | DISTRICT OF NEVADA | | | | |
| 0 | 40.40000 | | | | | |
| Case number (if known) | 19-10836 | | | П | Check if this is an | |
| | | | | _ | amended filing | |
| Stateme Be as comple information. | te and accurate as possil | ole. If two married people are attach a separate sheet to this | als Filing for Bankruptcy filing together, both are equally respons s form. On the top of any additional page | ible for s | | 4/ |
| Part 1: Giv | ve Details About Your Mar | rital Status and Where You Li | ved Before | | | |
| rait i. Gi | | | | | | |
| | our current marital status | s? | | | | |
| | | s? | | | | |
| I. What is y | | s? | | | | |
| Mhat is y Mar ■ Not During the | ried married ne last 3 years, have you l | ived anywhere other than wh | · | | | |
| Mhat is y ☐ Mar ☐ Not During th ☐ No ☐ Yes | ried married ne last 3 years, have you l | ived anywhere other than wh | · | | Dates Debtor I | 2 |
| 1. What is y ☐ Mar ☐ Not 2. During th ☐ No ☐ Yes Debtor 9688 La | ried married ne last 3 years, have you l List all of the places you liv | ived anywhere other than wh ved in the last 3 years. Do not in Dates Debtor 1 | nclude where you live now. | | | |
| 1. What is y ☐ Mar Not 2. During th ☐ No ☐ Yes Debtor 9688 La Las Ve | ried married ne last 3 years, have you l List all of the places you liv l Prior Address: amehorse Dr. | ved in the last 3 years. Do not in Dates Debtor 1 lived there From-To: Aug 2017- Oct | Debtor 2 Prior Address: | | lived there ☐ Same as Deb | tor 1 |

Case number (if known) 19-10836

| 4. | Did you have any income from e | mployment or from operatin | g a business during this ye | ear or the two previous cale | ndar years? |
|----|--|--|--|--|---|
| | Fill in the total amount of income you fix you are filing a joint case and you | ou received from all jobs and a | all businesses, including part- | time activities. | · |
| | □ No | | | | |
| | Yes. Fill in the details. | | | | |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | om January 1 of current year until e date you filed for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$4,771.00 | ☐ Wages, commissions, bonuses, tips | |
| | | ☐ Operating a business | | ☐ Operating a business | |
| | r last calendar year: nuary 1 to December 31, 2018) | ■ Wages, commissions, bonuses, tips | \$17,085.00 | ☐ Wages, commissions, bonuses, tips | |
| | | ☐ Operating a business | | ☐ Operating a business | |
| | r the calendar year before that: nuary 1 to December 31, 2017) | ■ Wages, commissions, bonuses, tips | \$46,765.00 | ☐ Wages, commissions, bonuses, tips | |
| | | _ | | | |
| 5. | Did you receive any other income | | | ☐ Operating a business | Security unemployment |
| 5. | Did you receive any other incominclude income regardless of wheth and other public benefit payments; winnings. If you are filing a joint cast List each source and the gross incoming. No Yes. Fill in the details. | e during this year or the two ner that income is taxable. Exa pensions; rental income; inter se and you have income that y | amples of other income are a sest; dividends; money collec- you received together, list it o | limony; child support; Social S ted from lawsuits; royalties; ar only once under Debtor 1. | |
| 5. | Include income regardless of wheth and other public benefit payments; winnings. If you are filing a joint cast List each source and the gross income. | e during this year or the two ner that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separa | amples of other income are a sest; dividends; money collec- you received together, list it o | limony; child support; Social S ted from lawsuits; royalties; ar nly once under Debtor 1. nat you listed in line 4. | |
| 5. | Include income regardless of wheth and other public benefit payments; winnings. If you are filing a joint cast List each source and the gross income. | e during this year or the two ner that income is taxable. Exa pensions; rental income; inter se and you have income that y | amples of other income are a sest; dividends; money collec- you received together, list it o | limony; child support; Social S ted from lawsuits; royalties; ar only once under Debtor 1. | |
| | Include income regardless of wheth and other public benefit payments; winnings. If you are filing a joint case. List each source and the gross income. No Yes. Fill in the details. | e during this year or the two ner that income is taxable. Exa pensions; rental income; interse and you have income that you ome from each source separa | amples of other income are a lest; dividends; money collectou received together, list it of tely. Do not include income the dividence of the d | limony; child support; Social Sted from lawsuits; royalties; annly once under Debtor 1. That you listed in line 4. Debtor 2 Sources of income | Gross income (before deductions |

Case number (if known) 19-10836

| | _ | | | | | |
|-----|---|--|--|--|--|---|
| | | | ve primarily consumer del d for bankruptcy, did you pa | | al of \$600 or more? | • |
| | □ _{No.} | Go to line 7. | | | | |
| | ■ Yes | List below each credit | domestic support obligation | | | you paid that creditor. Do not Also, do not include payments to an |
| | Creditor's Name and | d Address | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
| | Landlord | | Last 90 Days | \$3,060.00 | \$0.00 | ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ■ Other Rent |
| 7. | Insiders include your roof which you are an off | elatives; any general pa ficer, director, person ir | n control, or owner of 20% or | eral partners; partner r more of their voting | erships of which yo g securities; and a | was an insider? u are a general partner; corporations ny managing agent, including one for s, such as child support and |
| | Yes. List all paym | nents to an insider. | | | | |
| | Insider's Name and | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Stephanine Vaugh | nan | 2/2019 | \$1,000.00 | \$0.00 | Loan |
| 8. | insider? Include payments on o | you filed for bankrupt debts guaranteed or cos | | ments or transfer a | any property on a | ccount of a debt that benefited an |
| | Insider's Name and | Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| Pai | rt 4: Identify Legal A | Actions, Repossessio | ns, and Foreclosures | | | |
| 9. | | ncluding personal injury | ccy, were you a party in an cases, small claims actions | | | |
| | Yes. Fill in the de | tails. | | | | |
| | Case title Case number | | Nature of the case | Court or agency | | Status of the case |
| | Check City Partne City vs BRANDIA LORISA | · | Complaint for Monies Due and Owing | Justice Court, Vegas Townsh 2332 N. Las Ve North Las Vega | ip gas Blvd | □ Pending□ On appeal□ Concluded |
| | 18CN003068 | | | | | Judgment |

Official Form 107

7.

8.

BRANDIA LORISA FORD Debtor 1 Case number (if known) 19-10836 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. □ No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property **Explain what happened America First Credit Union** 2017 Nissan Sentra 2/13/19 Unknown c/o Weinstein & Riley PS 6785 S Eastern Ave #4 Property was repossessed. Las Vegas, NV 89119 ☐ Property was foreclosed. ☐ Property was garnished. ☐ Property was attached, seized or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending

Official Form 107

insurance claims on line 33 of Schedule A/B: Property.

Debtor 1 BRANDIA LORISA FORD

Case number (if known) 19-10836

| Par | t 7: List Certain Payments or Transfers | | | | | |
|-----|---|---|-------------------------------|-----------------|---|---|
| 16. | Within 1 year before you filed for bankruptcy consulted about seeking bankruptcy or prepinclude any attorneys, bankruptcy petition prep | paring a bankruptcy pe | tition? | . , | ,, , | rty to anyone you |
| | □ No■ Yes. Fill in the details. | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and variansferred | alue of any prope | erty | Date payment or transfer was made | Amount of payment |
| | Ballstaedt Law 9555 S Eastern Ave. Ste #210 Las Vegas, NV 89123 help@bkvegas.com Debtor | Attorney Fees | | | 2/27/2019 | \$600.00 |
| 17. | Within 1 year before you filed for bankruptcy promised to help you deal with your credito Do not include any payment or transfer that you No | rs or to make payments | | | r transfer any prope | rty to anyone who |
| | ☐ Yes. Fill in the details. | | | | | |
| | Person Who Was Paid Address | Description and variansferred | alue of any prope | erty | Date payment or transfer was made | Amount of payment |
| 18. | Within 2 years before you filed for bankrupte transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread. No | usiness or financial affa ade as security (such as | airs? the granting of a se | | | |
| | Yes. Fill in the details. | | | | | |
| | Person Who Received Transfer Address | Description and property transfer | | | any property or received or debts change | Date transfer was made |
| | Person's relationship to you | | | | | |
| 19. | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details. | | ny property to a se | elf-settled tru | ist or similar device | of which you are a |
| | Name of trust | Description and | /alue of the prope | rty transferr | ed | Date Transfer was |
| | Hame of trust | Description and | raide of the proper | rty transferre | cu | made |
| Par | t 8: List of Certain Financial Accounts, Ins | struments, Safe Deposi | t Boxes, and Stora | age Units | | |
| 20. | Within 1 year before you filed for bankruptcy sold, moved, or transferred? | y, were any financial ac | counts or instrum | nents held in | your name, or for yo | our benefit, closed, |
| | Include checking, savings, money market, o houses, pension funds, cooperatives, associon No | | | f deposit; sh | ares in banks, credi | t unions, brokerage |
| | Yes. Fill in the details. | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account instrument | clo | te account was sed, sold, ved, or nsferred | Last balance before closing or transfer |
| | | | | | | |

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| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of accour | nt or Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
|-----|---|--|---|--|---|
| | America First Credit Union c/o Weinstein & Riley PS 6785 S Eastern Ave #4 Las Vegas, NV 89119 | XXXX-0113 | ■ Checking □ Savings □ Money Mark □ Brokerage □ Other | 2/2019 et | \$0.00 |
| 21. | Do you now have, or did you have within 1 cash, or other valuables? | year before you filed | for bankruptcy, any | safe deposit box or other depo | sitory for securities, |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had a Address (Number State and ZIP Code) | er, Street, City, | Describe the contents | Do you still have it? |
| 22. | Have you stored property in a storage unit | or place other than yo | our home within 1 y | ear before you filed for bankrup | tcy? |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has of to it? Address (Number State and ZIP Code) | er, Street, City, | Describe the contents | Do you still have it? |
| Pai | t 9: Identify Property You Hold or Contro | | | | |
| 23. | Do you hold or control any property that so for someone. | omeone else owns? Ir | nclude any property | you borrowed from, are storing | for, or hold in trust |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the pi (Number, Street, Cit Code) | | Describe the property | Value |
| Pai | tt 10: Give Details About Environmental Inf | , | | | |
| For | the purpose of Part 10, the following definit | ions apply: | | | |
| | Environmental law means any federal, state toxic substances, wastes, or material into regulations controlling the cleanup of thes | the air, land, soil, surf | ace water, groundv | | |
| | Site means any location, facility, or propert to own, operate, or utilize it, including disp | - | ny environmental la | w, whether you now own, opera | te, or utilize it or used |
| | Hazardous material means anything an enhazardous material, pollutant, contaminant | | es as a hazardous v | waste, hazardous substance, tox | cic substance, |
| Rep | ort all notices, releases, and proceedings th | nat you know about, re | egardless of when t | they occurred. | |
| 24. | Has any governmental unit notified you that | at you may be liable o | r potentially liable υ | ınder or in violation of an enviro | nmental law? |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental Address (Number ZIP Code) | unit er, Street, City, State and | Environmental law, if you know it | Date of notice |
| | | | | | |

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Case number (if known) 19-10836

| 25. | Have you notified any governmental unit of | any release of hazardous material? | | |
|------------|--|---|--|-------------------|
| | = | • | | |
| | ■ No □ Yes. Fill in the details. | | | |
| | Name of site | Governmental unit | Environmental law, if you | Date of notice |
| | Address (Number, Street, City, State and ZIP Code) | Address (Number, Street, City, State and ZIP Code) | | |
| 26. | Have you been a party in any judicial or ad- | ministrative proceeding under any envi | ronmental law? Include settlements a | and orders. |
| | _ | | | |
| | ■ No □ Yes. Fill in the details. | | | |
| | Case Title | Court or agency | Nature of the case | Status of the |
| | Case Number | Name Address (Number, Street, City, State and ZIP Code) | | case |
| Par | t 11: Give Details About Your Business or | Connections to Any Business | | |
| 27. | Within 4 years before you filed for bankrup | toy did you own a business or have an | by of the following connections to any | v husiness? |
| | <u> </u> | in a trade, profession, or other activity, | | , business. |
| | _ | pany (LLC) or limited liability partnersh | | |
| | ☐ A partner in a partnership | , (, | ·F (/ | |
| | ☐ An officer, director, or managing ex | secutive of a corporation | | |
| | _ | ng or equity securities of a corporation | | |
| | No. None of the above applies. Go to | | | |
| | _ | l in the details below for each business | • | |
| | Business Name | Describe the nature of the business | Employer Identification number | r |
| | Address (Number, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | Do not include Social Security Dates business existed | |
| 28. | Within 2 years before you filed for bankrup | tcy, did you give a financial statement t | | ude all financial |
| | institutions, creditors, or other parties. | | | |
| | ■ No | | | |
| | Yes. Fill in the details below. | | | |
| | Name Address | Date Issued | | |
| | (Number, Street, City, State and ZIP Code) | | | |
| Par | t 12: Sign Below | | | |
| | ve read the answers on this Statement of Fi rue and correct. I understand that making a | | | |
| with | a bankruptcy case can result in fines up to | | | ad in connection |
| 18 U | .S.C. §§ 152, 1341, 1519, and 3571. | | | |
| | BRANDIA LORISA FORD ANDIA LORISA FORD | Signature of Debtor 2 | | |
| | nature of Debtor 1 | C.g 2 | | |
| Dat | March 8, 2019 | Date | | |
| _ | you attach additional pages to Your Statem | ent of Financial Affairs for Individuals F | Filing for Bankruptcy (Official Form 1 | 07)? |
| ■ N | - | | | |
| | | | | |
| Did ■ N | you pay or agree to pay someone who is no | t an attorney to help you fill out bankru | ptcy forms? | |
| _ ` | es. Name of Person Attach the <i>Bankru</i> | uptcy Petition Preparer's Notice, Declaration | on, and Signature (Official Form 119). | |
| Offic | al Form 107 Staten | nent of Financial Affairs for Individuals Filing | for Bankruptcy | page 7 |

Debtor 1 BRANDIA LORISA FORD

Case number (if known) 19-10836

| Debtor 1 | BRANDIA LORIS | A FORD | | |
|--------------------|-------------------------|--------------------|-----------|--------------------------------------|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| Spouse if, filing) | First Name | Middle Name | Last Name | |
| | nkruptcy Court for the: | DISTRICT OF NEVADA | | |
| | 19-10836 | | | - 0, 1,7,1, |
| f known) | | | | ☐ Check if this is an amended filing |

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Creditor's name: Description of property securing debt: Creditor's Description of property Securing debt: Description of property Securing debt: Creditor's Description of Retain the property and lexplain]: Retain the property and redeem it. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. | |
|--|---------|
| Description of Property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | □ No |
| Description of property Retain the property and [explain]: Creditor's Surrender the property and redeem it. Description of Retain the property and enter into a Reaffirmation Agreement. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | |
| Creditor's Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Property Retain the property and [explain]: Creditor's Surrender the property. Retain the property and redeem it. Retain the property and redeem it. Retain the property and redeem it. Retain the property and enter into a Retain the Property | n ☐ Yes |
| name: Description of Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Retain the property and [explain]: Creditor's Surrender the property. Retain the property and redeem it. Retain the property and redeem it. Retain the property and redeem it. | |
| Description of Retain the property and enter into a Reaffirmation Agreement. Property Retain the property and [explain]: Creditor's Surrender the property. Retain the property and redeem it. Retain the property and redeem it. Retain the property and enter into a Retain the Retain the Property and Enter into a Retain the Property and Ente | □ No |
| Description of reaffirmation Agreement. Property Retain the property and [explain]: Creditor's Surrender the property. Retain the property and redeem it. Retain the property and enter into a | _ |
| Creditor's Surrender the property. Retain the property and redeem it. Retain the property and enter into a | n □ Yes |
| name: Retain the property and redeem it. Retain the property and enter into a | |
| Retain the property and enter into a | □ No |
| | |
| | n ☐ Yes |
| property | |
| securing debt: | |
| Creditor's ☐ Surrender the property. | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Debtor 1 | BRANDIA LORISA FORD | Case number (if known) | 19-10836 |
|--------------------------|--|---|---------------------------------|
| name: | | ☐ Retain the property and redeem it.☐ Retain the property and enter into a | ☐ Yes |
| Descrip | | Reaffirmation Agreement. | |
| propert securin | ry ng debt: | ☐ Retain the property and [explain]: | - |
| For any unit in the info | nexpired personal property lease that you lormation below. Do not list real estate lease | ases isted in Schedule G: Executory Contracts and Unexpired s. Unexpired leases are leases that are still in effect; the se if the trustee does not assume it. 11 U.S.C. § 365(p)(2 | lease period has not yet ended. |
| Describe | your unexpired personal property leases | | Will the lease be assumed? |
| Lessor's r | | | □ No |
| Description Property: | on of leased | | ☐ Yes |
| Lessor's r | name: | | □ No |
| Description Property: | on of leased | | |
| Floperty. | | | ☐ Yes |
| Lessor's r | name: on of leased | | □ No |
| Property: | | | ☐ Yes |
| Lessor's r | | | □ No |
| Description Property: | on of leased | | ☐ Yes |
| Lessor's r | | | □ No |
| Description Property: | on of leased | | ☐ Yes |
| Lessor's r | name: | | □ No |
| Description Property: | on of leased | | ☐ Yes |
| Lessor's r | name: | | □ No |
| Description Property: | on of leased | | ☐ Yes |
| Part 3: | Sign Below | | |
| Under per | | ed my intention about any property of my estate that sec | cures a debt and any personal |
| X /s/ E | BRANDIA LORISA FORD | x | |
| | ANDIA LORISA FORD lature of Debtor 1 | Signature of Debtor 2 | |
| Date | March 8, 2019 | Date | |

Official Form 108

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of Nevada

| In re | BRANDIA LORISA FORD | | Case No. | 19-10836 |
|----------------|---|--|---|---|
| | | Debtor(s) | Chapter | 7 |
| | DISCLOSURE OF COMPENSAT | TION OF ATTOR | NEY FOR DE | BTOR(S) |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I co- compensation paid to me within one year before the filing of the be rendered on behalf of the debtor(s) in contemplation of or in | e petition in bankruptcy, o | or agreed to be paid t | to me, for services rendered or to |
| | | | | 2,268.00 |
| | Prior to the filing of this statement I have received | | \$ | 600.00 |
| | Balance Due | | \$ | 1,668.00 |
| 2. | 80.00 of the filing fee has been paid. | | | |
| 3. | The source of the compensation paid to me was: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. | The source of compensation to be paid to me is: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 5. | ■ I have not agreed to share the above-disclosed compensatio | n with any other person u | nless they are memb | pers and associates of my law firm. |
| | ☐ I have agreed to share the above-disclosed compensation w copy of the agreement, together with a list of the names of the same of the copy of the agreement. | | | |
| 6. | In return for the above-disclosed fee, I have agreed to render le | gal service for all aspects | of the bankruptcy ca | ase, including: |
| | a. Analysis of the debtor's financial situation, and rendering ad b. Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and d. [Other provisions as needed] Debtor and Attorney entered into two separate bankruptcy petition, and a post-petition contrafor 12 months following the filing of the bankr filing fee is paid in full. | of affairs and plan which a confirmation hearing, and contracts. A prepetite contracts with monthly payn | may be required; If any adjourned hear tion contract for \$ nents for bankrup | ings thereof; 60 for the filing of a skeletal atcy matters and continuing |
| 7. | By agreement with the debtor(s), the above-disclosed fee does not need to reditions with secured creditors to reduce and/or reaffirmations. Representation of the discrete from stay actions or any other adversary | to market value purs ebtors in any dischar | uant to 506(a) cra | |
| | CER | RTIFICATION | | |
| | I certify that the foregoing is a complete statement of any agree ankruptcy proceeding. | ment or arrangement for p | payment to me for re | presentation of the debtor(s) in |
| N | larch 8, 2019 | /s/ Seth D Ballstae | edt | |
| \overline{L} | ate | Seth D Ballstaedt Signature of Attorney | , | |
| | | Ballstaedt Law | | |
| | | 9555 S Eastern Av Las Vegas, NV 891 | | |
| | | (702) 715-0000 | | |
| | | help@bkvegas.co | m | |
| | | Name of law firm | | |

United States Bankruptcy Court District of Nevada

| n re | BRANDIA LORISA FORD | | Case No. | 19-10836 |
|-------|---------------------------------|--|--------------------|-----------------------|
| | | Debtor(s) | Chapter | 7 |
| | VER | RIFICATION OF CREDITOR N | MATRIX | |
| e abo | ove-named Debtor hereby verifie | s that the attached list of creditors is true and co | orrect to the best | of his/her knowledge. |
| ate: | March 8, 2019 | /s/ BRANDIA LORISA FORD BRANDIA LORISA FORD | | |

Signature of Debtor